								_		_
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE NUMBER: (check only one)				PAGE 2 OF 2				
	for each category of the Detailed Summary Page	(ched	21b [	22 28a	23 28b	السا	24 28c	25 29	Н	26 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may not be sold or use ame and address of any politic	ed by an	y persor	o for the solicit co	purpose ntributior	of sol	iciting o	ontribut ommitt	ions ee.	
NAME OF COMMITTEE (In Full)										
Full Name (Last, First, Middle Initial)		مر		Date o	f Disburs	emeni				
Bachmantor	Congress-	-60°	ma	000		0	/ <b>57</b> 7	<b>ና</b> ጆ፣	7	
Majling Address P.O. ISOX 25950	. <b>.</b>	rv.	. <i>C</i> ( (ψ)			O		10	7	
Woodbury Purpose of Disbursement	State Zip Code 25	>								
Campalan contri	bution	01			t of Eacl		ursemen	t this f	>erio	d
Michele Bachmann Category/ Type				ļ		F	5,00	200	<u>)(</u>	
Office Sought: House Disburs	ement For: Primary Seneral									
President	Other (specify)									
State: ND District: Q+N  Full Name (Last, First, Middle Initial)									_	
" Erik Paulsen for Congress				Date o	f Disburs	emen	1			
199 Address 44369						0	' 2C	50	$\mathcal{L}$	
	19 55344									
Campaign contribution OII					t of Eac		ursemen	it this i	Perio	d
Candidate Name Category/ Type				•	-11) -11)		500	<u>)()</u>	0(	2
Office Sought: House Disburs Senate	ement For: Primary General									
State: NN District: 370	Other (specify) ▼									
Full Name (Last, First, Middle Initial)				-	. 5:-1					
"TCF National Bank				Date o	f Disbur	semen	' <b>'                                  </b>	7 % Y =	<b>37</b> 1	
Marguette Ave				Ų.			<u> </u>			
City MINITADOLIS N Purpose of Disbursement	State Zip Code 02									
Check printing charge [60]				Amour	t of Eac	h Disb	ursemer	nt this I	Peric	)d
Candidate Name .	ر	Catego Type				-y		5	5	0
Office Sought: House Disburs Senate	ement For: Primary General						and the second section is			
President  State: District:	Other (specify)	7 L								

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only)......